



\*1031174080\*

IN THE DISTRICT COURT OF OKLAHOMA COUNTY  
STATE OF OKLAHOMA

RANDY BLAKE PATTERSON, )  
Plaintiff, )  
v. )  
NATIONAL BOARD OF MEDICAL )  
EXAMINERS, )  
Defendant. )

Case No.

CI-2015-5283

RECEIVED  
OKLAHOMA CITY CLERK'S OFFICE  
OCT 20 2015

SUMMONS

To the above-named Defendant:

National Board of Medical Examiners  
C/o Donald E. Melnick, M.D., President  
3750 Market Street  
Philadelphia, PA 19104-0

You have been sued by the above-named plaintiff, and you are directed to file a written answer to the attached petition in the court at the above address within twenty (20) days after service of this summons upon you, exclusive of the day of service. Within the same time, a copy of your answer must be delivered or mailed to the attorney for the plaintiff.

Unless you answer the petition within the time stated, judgment will be rendered against you with costs of the action.

Issued this 29 day of September, 2015.

TIM RHODES, COURT CLERK

By:

Deputy Court Clerk

Steven E. Clark, OBA#1712  
Heather J. Mitchell, OBA#14035  
CLARK & MITCHELL, P.C.  
101 Park Avenue, Suite 210  
Oklahoma City, OK 73102  
(405) 235-8488; (405) 235-7979 (fax)  
[clark@clarkmitchell.com](mailto:clark@clarkmitchell.com)  
[heather@clarkmitchell.com](mailto:heather@clarkmitchell.com)  
Attorneys for Plaintiff

YOU MAY SEEK THE ADVICE OF AN ATTORNEY ON ANY MATTER CONNECTED WITH THIS SUIT OR YOUR ANSWER. SUCH ATTORNEY SHOULD BE CONSULTED IMMEDIATELY SO THAT AN ANSWER MAY BE FILED WITHIN THE TIME LIMIT STATED IN THE SUMMONS.

EXHIBIT

2

tabloid

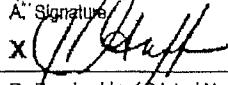
## CERTIFICATE OF SERVICE BY MAIL

I certify that I mailed copies of the foregoing summons with a copy of the Petition attached to the following named Defendant(s) at the address shown by certified mail, addresses only, return receipt requested on the 1st day of October, 2015 and receipt therof on the dates shown:

Defendant	Address Where Serviced	Date Received
National Board of Medical Examiners C/o Donald E. Melnick MD President	3750 Market Street Philadelphia, PA 19104	October 6, 2015

CLARK &amp; MITCHELL, P.C.

By: Rona Spaulder

<b>SENDER- COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<p>33 3798 2798 0000 0000 1150 7011</p> <p>■ Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature </p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Rona Spaulder</u></p> <p>C. Date of Delivery <u>10/06/15</u></p> <p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail   <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered   <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail   <input type="checkbox"/> C.O.D.  4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Addressed to:             National Board of Medical Examiners            C/o Donald E. Melnick, M.D., President            3750 Market Street            Philadelphia, PA 19104-0</p>		<p>7011 1150 0000 2798 3733</p>	